Form 5500	Annual Return/Report of Employee Benefit Plan	OMB Nos. 1210-0110 1210-0089
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code). ▶ **Complete all entries in accordance with the instructions to the Form 5500.**	**2010** **This Form is Open to Public Inspection**

Part I Annual Report Identification Information

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan; or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report;
- [ ] the final return/report;
- [ ] an amended return/report;
- [ ] a short plan year return/report (less than 12 months).

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
PREMIER FARNELL CORPORATION 401K RETIREMENT SAVINGS PLAN

1b Three-digit plan number (PN) ▶ 024

1c Effective date of plan 04/01/1999

2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.)
PREMIER FARNELL CORPORATION

7061 E. PLEASANT VALLEY ROAD
INDEPENDENCE, OH 44131

2b Employer Identification Number (EIN) 51-0373145

2c Sponsor's telephone number 216-525-4273

2d Business code (see instructions) 454110

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	09/30/2011	PAUL M BARLAK
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") PREMIER FARNELL CORPORATION 7061 E. PLEASANT VALLEY ROAD INDEPENDENCE, OH 44131	**3b** Administrator's EIN 51-0373145 **3c** Administrator's telephone number 216-525-4273

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:		**4b** EIN
a Sponsor's name		**4c** PN

5 Total number of participants at the beginning of the plan year	**5**	2329
6 Number of participants as of the end of the plan year (welfare plans complete only lines **6a, 6b, 6c,** and **6d**).		
a Active participants	**6a**	1668
b Retired or separated participants receiving benefits	**6b**	1
c Other retired or separated participants entitled to future benefits	**6c**	377
d Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	2046
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	1
f Total. Add lines **6d** and **6e**	**6f**	2047
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	1988
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:

2J 2F 2G 2E 2S 2T 3H

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1) [X]	Insurance	**(1)** [X]	Insurance
(2) [ ]	Code section 412(e)(3) insurance contracts	**(2)** [ ]	Code section 412(e)(3) insurance contracts
(3) [X]	Trust	**(3)** [X]	Trust
(4) [ ]	General assets of the sponsor	**(4)** [ ]	General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules		**b General Schedules**		
(1) [X]	**R** (Retirement Plan Information)	**(1)** [X]		**H** (Financial Information)
(2) [ ]	**MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	**(2)** [ ]		**I** (Financial Information – Small Plan)
		(3) [X]	1	**A** (Insurance Information)
		(4) [X]		**C** (Service Provider Information)
(3) [ ]	**SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	**(5)** [X]		**D** (DFE/Participating Plan Information)
		(6) [ ]		**G** (Financial Transaction Schedules)

SCHEDULE A (Form 5500)	Insurance Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.** ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	**2010** **This Form is Open to Public Inspection**

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan	**B** Three-digit plan number (PN) ▶
PREMIER FARNELL CORPORATION 401K RETIREMENT SAVINGS PLAN	024
C Plan sponsor's name as shown on line 2a of Form 5500.	**D** Employer Identification Number (EIN)
PREMIER FARNELL CORPORATION	51-0373145

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier

PRUDENTIAL RETIREMENT INSURANCE & ANNUITY CO.

(b) EIN	**(c)** NAIC code	**(d)** Contract or identification number	**(e)** Approximate number of persons covered at end of policy or contract year	Policy or contract year **(f)** From	**(g)** To
06-1050034	93629	38235-001	2047	01/01/2010	12/31/2010

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in item 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	**(b)** Total amount of fees paid
0	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid **(c)** Amount	**(d)** Purpose	**(e)** Organization code

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid **(c)** Amount	**(d)** Purpose	**(e)** Organization code

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	4	14413286
5	Current value of plan's interest under this contract in separate accounts at year end	5	25561308

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☒ other ▶ GUARANTEED GENERAL ACCOUNT CONTRACT

b	Balance at the end of the previous year		7b	12556976
c	Additions: (1) Contributions deposited during the year	7c(1)	3093850	
	(2) Dividends and credits	7c(2)		
	(3) Interest credited during the year	7c(3)	325487	
	(4) Transferred from separate account	7c(4)	834790	
	(5) Other (specify below)	7c(5)	607954	
	▶ LOAN REPAYMENTS TRANSFERS IN, MISCELLANEOUS IN FORFEITURE CREDITS			
	(6)Total additions		7c(6)	4862081
d	Total of balance and additions (add **b** and **c(6)**).		7d	17419057
e	Deductions:			
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	1425715	
	(2) Administration charge made by carrier	7e(2)	20407	
	(3) Transferred to separate account	7e(3)	716641	
	(4) Other (specify below)	7e(4)	843008	
	▶ LOAN INITIATIONS TRANSFERS OUT MISCELLANEOUS OUT			
	(5) Total deductions		7e(5)	3005771
f	Balance at the end of the current year (subtract **e(5)** from **d**)		7f	14413286

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organization(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- **a** ☐ Health (other than dental or vision)
- **b** ☐ Dental
- **c** ☐ Vision
- **d** ☐ Life insurance
- **e** ☐ Temporary disability (accident and sickness)
- **f** ☐ Long-term disability
- **g** ☐ Supplemental unemployment
- **h** ☐ Prescription drug
- **i** ☐ Stop loss (large deductible)
- **j** ☐ HMO contract
- **k** ☐ PPO contract
- **l** ☐ Indemnity contract
- **m** ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	9a(1)			
(2) Increase (decrease) in amount due but unpaid	9a(2)			
(3) Increase (decrease) in unearned premium reserve	9a(3)			
(4) Earned (**(1)** + **(2)** - **(3)**)			9a(4)	
b Benefit charges (1) Claims paid	9b(1)			
(2) Increase (decrease) in claim reserves	9b(2)			
(3) Incurred claims (add **(1)** and **(2)**)			9b(3)	
(4) Claims charged			9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	9c(1)(A)			
(B) Administrative service or other fees	9c(1)(B)			
(C) Other specific acquisition costs	9c(1)(C)			
(D) Other expenses	9c(1)(D)			
(E) Taxes	9c(1)(E)			
(F) Charges for risks or other contingencies	9c(1)(F)			
(G) Other retention charges	9c(1)(G)			
(H) Total retention			9c(1)(H)	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			9d(1)	
(2) Claim reserves			9d(2)	
(3) Other reserves			9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in **c(2)**.)			9e	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, item 2 above, report amount.			10b	

Specify nature of costs ▶

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).	2010
Department of Labor Employee Benefits Security Administration	▶ **File as an attachment to Form 5500.**	**This Form is Open to Public Inspection.**
Pension Benefit Guaranty Corporation		

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan
PREMIER FARNELL CORPORATION 401K RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 024

C Plan sponsor's name as shown on line 2a of Form 5500
PREMIER FARNELL CORPORATION

D Employer Identification Number (EIN)
51-0373145

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . [X] Yes [ ] No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

PRUDENTIAL RETIREMENT INSURANCE AND

06-1050034

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation

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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

NRP ADVISORS, INC.

20-5468980

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	NONE	71273	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

PRUDENTIAL RETIREMENT INSURANCE AND

06-1050034

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
13 15 37 50 64	NONE	41066	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

(a) Enter name and EIN or address (see instructions)

THE PRUDENTIAL INSURANCE COMPANY OF

22-1211670

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15	NONE	0	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	**(c)** Relationship to employer, employee organization, or person known to be a party-in-interest	**(d)** Enter direct compensation paid by the plan. If none, enter -0-.	**(e)** Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	**(f)** Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	**(g)** Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	**(h)** Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	**(c)** Relationship to employer, employee organization, or person known to be a party-in-interest	**(d)** Enter direct compensation paid by the plan. If none, enter -0-.	**(e)** Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	**(f)** Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	**(g)** Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	**(h)** Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	**(c)** Relationship to employer, employee organization, or person known to be a party-in-interest	**(d)** Enter direct compensation paid by the plan. If none, enter -0-.	**(e)** Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	**(f)** Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	**(g)** Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	**(h)** Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

a Name:	**b** EIN:
c Position:	
d Address:	**e** Telephone:

Explanation:

a Name:	**b** EIN:
c Position:	
d Address:	**e** Telephone:

Explanation:

a Name:	**b** EIN:
c Position:	
d Address:	**e** Telephone:

Explanation:

a Name:	**b** EIN;
c Position:	
d Address:	**e** Telephone:

Explanation:

a Name:	**b** EIN;
c Position:	
d Address:	**e** Telephone:

Explanation:

SCHEDULE D (Form 5500)	DFE/Participating Plan Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2010** **This Form is Open to Public Inspection.**

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan PREMIER FARNELL CORPORATION 401K RETIREMENT SAVINGS PLAN	**B** Three-digit plan number (PN) ▶ 024
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 PREMIER FARNELL CORPORATION	**D** Employer Identification Number (EIN) 51-0373145

Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)

(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: INTERN BLEND/ARTIO

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
06-1050034-349	P	4598271

a Name of MTIA, CCT, PSA, or 103-12 IE: CORE PLUS BOND/PIMCO

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
06-1050034-299	P	3214895

a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP BLEND/WHV FUND

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
06-1050034-477	P	3377893

a Name of MTIA, CCT, PSA, or 103-12 IE: EATON VANCE LRG CP A

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
06-1050034-481	P	2831175

a Name of MTIA, CCT, PSA, or 103-12 IE: SA/INV SM CAP GROW STRAT

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
06-1050034-293	P	1473893

a Name of MTIA, CCT, PSA, or 103-12 IE: SA/OAK EQ & INC STRAT

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
06-1050034-307	P	3194301

a Name of MTIA, CCT, PSA, or 103-12 IE: SA/WF SM CAP VAL STRAT II

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
06-1050034-276	P	1589813

a Name of MTIA, CCT, PSA, or 103-12 IE: LARGE CAP BLEND/VICTORY

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN 06-1050034-123	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2448033

a Name of MTIA, CCT, PSA, or 103-12 IE: DRYDEN S & P 500 INDEX FUND

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN 06-1050034-177	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2833034

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN

SCHEDULE H (Form 5500)	Financial Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ **File as an attachment to Form 5500.**	**2010** **This Form is Open to Public Inspection**

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan
PREMIER FARNELL CORPORATION 401K RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 024

C Plan sponsor's name as shown on line 2a of Form 5500
PREMIER FARNELL CORPORATION

D Employer Identification Number (EIN)
51-0373145

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	191
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	345	26854
(2) Participant contributions	1b(2)	352	43765
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	1256595	1637857
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	19100704	25561308
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	2752048	4467989
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	12556976	14413286
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	35667020	46151250
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	35667020	46151250

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	3336717	
(B) Participants	2a(1)(B)	5844108	
(C) Others (including rollovers)	2a(1)(C)	360159	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		9540984
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	61215	
(F) Other	2b(1)(F)	325487	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		386702
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	29406	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		29406
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b **(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		2895985
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		560039
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		13413116

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2813086	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		2813086
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		3461
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	112339	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		112339
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		2928886

Net Income and Reconciliation

k Net income (loss). Subtract line **2j** from line **2d**	2k		10484230
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☐ Unqualified **(2)** ☐ Qualified **(3)** ☒ Disclaimer **(4)** ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? ☒ Yes ☐ No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: MALONEY NOVOTNY LLC **(2)** EIN: 34-0677006

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, or MTIA. **(2)** ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.

During the plan year:

			Yes	No	Amount
a	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		500000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?
If yes, enter the amount of any plan assets that reverted to the employer this year ☐ **Yes** ☒ **No** **Amount:**

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

SCHEDULE R (Form 5500)	Retirement Plan Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ **File as an attachment to Form 5500.**	**2010** **This Form is Open to Public Inspection.**

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan
PREMIER FARNELL CORPORATION 401K RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 024

C Plan sponsor's name as shown on line 2a of Form 5500
PREMIER FARNELL CORPORATION

D Employer Identification Number (EIN)
51-0373145

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 22-1211670 _____

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year. **3**

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section of 412 of the Internal Revenue Code or ERISA section 302, skip this Part)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box(es). If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 a Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

14 Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If item 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete items (a) through (c)

a Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate item 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

PREMIER FARNELL CORPORATION
401(k) RETIREMENT SAVINGS PLAN

FINANCIAL REPORT

DECEMBER 31, 2010 and 2009

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

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maloney+novotny LLC

The Plan Administrator, Participants and Board of Directors
Premier Farnell Corporation 401(k)
Retirement Savings Plan
Cleveland, Ohio

Independent Auditors' Report

We were engaged to audit the financial statements and supplemental schedule of Premier Farnell Corporation 401(k) Retirement Savings Plan (the "Plan") as of December 31, 2010 and 2009, and for the years then ended, as listed in the accompanying table of contents. These financial statements and supplemental schedule are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by Prudential Retirement Insurance & Annuity Company, the trustee of the Plan, and Prudential Bank & Trust FSB Company, custodian of the Plan, except for comparing the information with the related information included in the financial statements and the supplemental schedule. We have been informed by the plan administrator that the trustee and custodian hold the Plan's investment assets and execute investment transactions. The plan administrator has obtained certifications from the trustee and custodian as of and for the years ended December 31, 2010 and 2009, that the information provided to the plan administrator by the trustee and custodian is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedule taken as a whole. The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustee and custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Maloney + Novotny LLC

Cleveland, Ohio
September 23, 2011

Business Advisors and Certified Public Accountants
Cleveland | Canton | Elyria

NEXIA INTERNATIONAL

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2010 and 2009

	2010	2009
ASSETS		
Cash	$ 191	$ -
Investments at Fair Value:		
Group Annuity Contract:		
Guaranteed Income Fund	14,413,286	12,556,976
Pooled Separate Accounts:		
Intern Blend/Artio	4,598,271	3,375,808
Small Cap Blend/Whv Fund	3,377,893	2,791,873
Core Plus Bond/PIMCO	3,214,895	2,100,617
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Dryden S&P 500 Index Fund	2,833,034	2,410,556
Eaton Vance Lrg Cap A	2,831,175	1,655,319
Large Cap Blend/Victory	2,448,033	2,179,736
Sa/Wf Sm Cap Val Strat II	1,589,813	823,156
Sa/Inv Sm Cap Grow Strat	1,473,893	767,734
Lifetime Aggressive (20)	-	533,307
Lifetime Growth Fd (30)	-	385,549
Lifetime Balanced Fd (40)	-	377,969
Lifetime Conservative (50)	-	196,363
Lifetime Income & Equity (60)	-	104,758
Sa/Alger Midcap Gr Strat	-	36,415
Registered Investment Companies:		
Growth Fund of America R3	2,865,143	1,654,740
Ridge Md Cap Val Eqy Cl I	1,493,998	-
Pru Jenn Md Cp Grw A	108,848	-
Columbia Mid Cap Value A	-	1,097,308
Total	44,442,583	34,409,728
Receivables:		
Employee contributions receivable	43,765	352
Employer contributions receivable	26,854	345
Notes receivable from participants	1,637,857	1,256,595
Total receivables	1,708,476	1,257,292
NET ASSETS AVAILABLE FOR BENEFITS	$46,151,250	$35,667,020

The accompanying notes are an integral part of these financial statements.

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Years Ended December 31, 2010 and 2009

	2010	2009
ADDITIONS		
Investment income:		
Net appreciation in fair value of investments	$ 3,456,024	$ 4,336,494
Interest and dividends	354,893	359,033
Total investment income	3,810,917	4,695,527
Interest income on notes receivable from participants	61,215	75,171
Contributions:		
Employee contributions	5,844,108	4,761,656
Employer contributions	3,336,717	1,238,050
Rollover contributions	360,159	552,088
Total contributions	9,540,984	6,551,794
Total additions	13,413,116	11,322,492
DEDUCTIONS		
Plan benefits paid to participants	2,816,547	4,614,972
Administrative fees	112,339	92,250
Total deductions	2,928,886	4,707,222
NET INCREASE	10,484,230	6,615,270
NET ASSETS AVAILABLE FOR BENEFITS – BEGINNING OF YEAR	35,667,020	29,051,750
NET ASSETS AVAILABLE FOR BENEFITS – END OF YEAR	$46,151,250	$35,667,020

The accompanying notes are an integral part of these financial statements.

Note 1. Description of Plan

The following description of the Premier Farnell Corporation 401(k) Retirement Savings Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General:

The Plan began April 1, 1999 and is a defined contribution plan covering significantly all employees of Premier Farnell Corporation (the "Company") who have completed at least 30 days of eligible service other than the following employees to whom coverage has not been extended: union employees (except those of Weldon division) and leased employees. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Contributions:

Participants may make pre-tax contributions in any amount between 1% and 75% of their compensation, subject to certain limits imposed by the Internal Revenue Service. Unless employees elect otherwise upon becoming eligible to participate in the Plan, they are automatically enrolled to contribute 3% of compensation. Effective July 1, 2009, the Plan was formally amended for participants contributing less than 6%. As a result of this amendment, each year, unless they elect otherwise, participants contributing less than 6% will have their contribution increased by 1%, until 6% is reached. This excludes individuals who have elected not to contribute to the Plan.

Effective August 1, 2009, the Company matched contributions equal to 100% of the first 3% and 50% of the next 2% of eligible compensation contributed by participants, not exceeding a total match of 4%. In addition, the Company, at its discretion, may make qualified non-elective contributions ("QNEC") determined on an annual basis. No QNEC was made for 2010 or 2009.

Participant Accounts:

Each participant's account is credited with the participant's contribution and an allocation of any Company contribution and Plan earnings, and is charged with an allocation of administrative expenses. Participants direct their investment fund options. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Notes Receivable From Participants:

Participants may borrow from their fund accounts to the extent of one-half of their vested account balance under the Plan, not to exceed $50,000. The loans are secured by the balance in the participant's account and bear interest at rates that range from 4.25% to 10.50%. Loans issued during 2010 and 2009 bear interest at the prime rate plus 1% (4.25%). Principal and interest is paid ratably through monthly payroll deductions.

Vesting:

A participant has a 100% non-forfeitable vested interest in his or her portion of contributions as well as the Company's contributions.

Note 1. Description of Plan (Continued)

Funding:

The employer's funding policy is to remit participant contributions to the Plan as soon as they can be reasonably segregated from the Company's general assets within the time limits set by the Department of Labor.

Payment of Benefits:

A participant or his/her beneficiary, upon termination, death, or retirement, receives payment of his/her vested account balance in the form of cash. Additionally, the Plan has provisions for an active participant to make hardship withdrawals from his/her cash option account, subject to limitations and restrictions.

Note 2. Summary of Significant Accounting Policies

A. Basis of Presentation – The accompanying financial statements have been prepared on the accrual basis of accounting.

The Plan has evaluated subsequent events through September 23, 2011, which is the date the financial statements were available to be issued.

B. Investment Valuation and Income Recognition – Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 5 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Investments in the Prudential Retirement Insurance & Annuity Company ("Prudential") Guaranteed Income Fund are reported at contract value as determined by Prudential. All transactions within this contract are executed at contract value including full liquidation of the Fund. Though this qualifies as a benefit-responsive investment, Prudential has indicated that, because of the short duration of guaranteed interest rates (reset every six months), there is no material difference between contract value and fair value nor a difference between the crediting interest rate and the average earnings yield. At December 31, 2010 and 2009, the crediting interest rate was reset, therefore, Prudential has determined that the contract value and fair value of the Guaranteed Income Fund were the same, and no adjustment was recorded at year end.

Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined-contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The statements of net assets available for benefits present the fair value of the investment as well as the adjustment of the fully benefit-responsive investment from fair value to contract value (if applicable). The statements of changes in net assets available for benefits are prepared on a contract value basis.

Note 2. Summary of Significant Accounting Policies (Continued)

B. Investment Valuation and Income Recognition (Continued)

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The fair value of the Guaranteed Income Fund at December 31, 2010 and 2009 was $14,413,286 and $12,556,976, respectively. The crediting interest rate is based on several factors, including current economic and market conditions, the general interest rate environment, and both the expected and actual experience of a reference portfolio within the issuer's general account. These rates are established without the use of a specific formula.

The Guaranteed Income Fund does not permit the insurance company to terminate the agreement prior to the scheduled maturity date.

Average Yields	2010	2009
Based on earnings by Plan	2.50	2.50
Based on interest rate credited to participants	2.50	2.50

C. Notes Receivable From Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon terms of the Plan document.

D. Administrative Fees – Fees of the Plan are paid by the Company or the Plan at the discretion of the Company. In addition, any participants who elect to receive a loan, distribution, or withdrawal are charged a processing fee (see Note 7).

E. Use of Estimates – The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

F. Benefit Payments – Benefits are recorded when paid.

G. Reclassifications – Certain prior year amounts have been reclassified to conform to the current year presentation.

Note 3. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan at any time subject to the provisions of ERISA. In the event of Plan termination, participants will receive a total distribution of their account.

Note 4. Unaudited Information

Prudential, trustee of the Plan, and Prudential Bank & Trust FSB Company, custodian of the Plan, hold the Plan investment assets and execute transactions therein. Financial information relating to those assets is included in the accompanying financial statements and supplemental schedule based on information certified by the trustee and custodian. Investments that represent 5% or more of net assets are presented in the statements of net assets available for benefits. This information has not been audited by independent accountants. During 2010, the Plan replaced the Lifetime and Sa/Alger Midcap Gr Strat pooled separate account investment options and the Columbia Mid Cap Value A registered investment company investment option with other fund options and transferred the respective participants' account balances at their direction.

Changes in net assets available for benefits not audited include the following:

	2010	2009
Net appreciation in fair value of investments:		
Pooled separate accounts	$ 2,895,985	$ 3,792,357
Registered investment companies	560,039	544,137
Interest and dividends	354,893	359,033
Interest income on notes receivable from participants	61,215	75,171

Note 5. Fair Value Measurements

Financial Accounting Standards Board ("FASB") *Accounting Standards Codification* ("ASC") 820, *Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Level 1 – Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 – Inputs to the valuation methodology include

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable for the asset or liability;
- inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 – Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Note 5. Fair Value Measurements (Continued)

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2010 and 2009.

- The Guaranteed Income Fund is valued at contract value, which approximates fair value, and represents contributions plus interest at a specified rate, less participant withdrawals and fees. The Guaranteed Income Fund is classified as Level 3 as there are no quoted prices or other observable inputs for pricing.

- The fair value of investments held in the pooled separate accounts is based on their reported net asset value ("NAV"). The NAV is based primarily on observable inputs, the market value of the underlying investments, and classified as Level 2.

- The fair value of investments held in the registered investment companies is determined based on their quoted closing market prices in active markets for identical investments, and are classified as Level 1.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2010 and 2009:

Assets at Fair Value as of December 31, 2010

	Level 1	Level 2	Level 3	Total
Guaranteed Income Fund	$ -	-	$ 14,413,286	$ 14,413,286
Pooled Separate Accounts:				
International blend	-	4,598,271	-	4,598,271
Small cap	-	6,441,599	-	6,441,599
Fixed income	-	3,214,895	-	3,214,895
Equity and income strategy	-	3,194,301	-	3,194,301
Index funds	-	2,833,034	-	2,833,034
Large cap	-	5,279,208	-	5,279,208
Total Pooled Separate Accounts	-	25,561,308	-	25,561,308
Registered Investment Companies:				
Large cap growth	2,865,143	-	-	2,865,143
Mid cap value	1,493,998	-	-	1,493,998
Mid cap growth	108,848	-	-	108,848
Total Registered Investment Companies	4,467,989	-	-	4,467,989
Total	$ 4,467,989	$ 25,561,308	$ 14,413,286	$ 44,442,583

Note 5. Fair Value Measurements (Continued)

	Assets at Fair Value as of December 31, 2009			
	Level 1	Level 2	Level 3	Total
Guaranteed Income Fund	$ -	-	$ 12,556,976	$ 12,556,976
Pooled Separate Accounts:				
International blend	-	3,375,808	-	3,375,808
Small cap	-	4,382,763	-	4,382,763
Fixed income	-	2,100,617	-	2,100,617
Equity and income strategy	-	1,361,544	-	1,361,544
Index funds	-	2,410,556	-	2,410,556
Mid cap	-	36,415	-	36,415
Large cap	-	3,835,055	-	3,835,055
Lifetime duration asset allocation funds	-	1,597,946	-	1,597,946
Total Pooled Separate Accounts	-	19,100,704	-	19,100,704
Registered Investment Companies:				
Large cap growth	1,654,740	-	-	1,654,740
Mid cap value	1,097,308	-	-	1,097,308
Total Registered Investment Companies	2,752,048	-	-	2,752,048
Total	$ 2,752,048	$ 19,100,704	$ 12,556,976	$ 34,409,728

The table below sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the years ended December 31, 2010 and 2009:

	Level 3 Assets	
	2010 Guaranteed Income Fund	2009 Guaranteed Income Fund
Balance, beginning of year	$ 12,556,976	$ 12,779,373
Realized gains	325,487	341,483
Unrealized gains (losses) relating to instruments still held at the reporting date	-	-
Purchases, sales, issuances and settlements (net)	1,530,823	(563,880)
Balance, end of year	$ 14,413,286	$ 12,556,976

Note 6. Income Tax Status

The Internal Revenue Service has determined and informed the Company by a letter dated October 9, 2003, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code ("IRC"). Although the Plan has been amended since receiving the determination letter, the plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified and the related trust is tax-exempt.

Note 6. Income Tax Status (Continued)

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the organization has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan's management has analyzed the tax positions taken by the Plan and has concluded that, as of December 31, 2010, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan's management believes it is no longer subject to income tax examinations for years prior to 2007.

Note 7. Related Party Transactions

Certain Plan investments are held in a Guaranteed Income Fund, Pooled Separate Accounts, and Registered Investment Companies of Prudential, trustee of the Plan. Administrative expenses are paid to Prudential, trustee of the Plan, therefore, these transactions qualify as party-in-interest. Total asset-based and transaction-based fees paid to Prudential were $41,066 and $35,483 in 2010 and 2009, respectively.

As part of the Plan's fee structure, Prudential has agreed to reduce its fee revenue received out of the Plan's investment income and to use these fees instead to pay the cost of the Plan's third party investment advisor. These advisor fees amounted to $71,273 and $56,767 in 2010 and 2009, respectively, and are included in administrative fees on the statements of changes in net assets available for benefits.

Note 8. Risks and Uncertainties

The Plan holds various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

Note 9. Subsequent Event

The union employees who are employed by the Company on June 30, 2011 shall cease to be eligible to receive matching Company contributions under the Plan. An union employees hired, rehired, or transferred to the bargaining unit on or after July 1, 2011 shall be eligible to receive matching Company contributions under the Plan equal to 100% of the first 3% and 50% of the next 2% of each employee's compensation (as defined in the Plan) that such employee contributes to the Plan.

SUPPLEMENTAL SCHEDULE

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

Employer No. 51-0373145
Plan No. 024

December 31, 2010

(a)	(b) Identity of Party	(c) Description of Investment	Current (e) Value
*	Prudential Retirement Insurance & Annuity Company	Group Annuity Contract: Guaranteed Income Fund	$14,413,286
*	Prudential Retirement Insurance & Annuity Company	Pooled Separate Accounts:	
		Intern Blend/Artio	4,598,271
		Small Cap Blend/Whv Fund	3,377,893
		Core Plus Bond/PIMCO	3,214,895
		Sa/Oak Eq & Inc Strat	3,194,301
		Dryden S&P 500 Index Fund	2,833,034
		Eaton Vance Lrg Cap A	2,831,175
		Large Cap Blend/Victory	2,448,033
		Sa/Wf Sm Cap Val Strat II	1,589,813
		Sa/Inv Sm Cap Grow Strat	1,473,893
		Registered Investment Companies:	
	American Funds	Growth Fund of America R3	2,865,143
	RidgeWorth	Ridge Md Cap Val Eqy Cl I	1,493,998
*	Prudential Investments	Pru Jenn Md Cp Grw A	108,848
*	Participant Loans	Interest rates from 4.25% - 10.50%	1,637,857
			$46,080,440

* Represents a party-in-interest.

PREMIER FARNELL CORPORATION
401(k) RETIREMENT SAVINGS PLAN

FINANCIAL REPORT

DECEMBER 31, 2010 and 2009

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

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maloney+novotny LLC

The Plan Administrator, Participants and Board of Directors
Premier Farnell Corporation 401(k)
Retirement Savings Plan
Cleveland, Ohio

Independent Auditors' Report

We were engaged to audit the financial statements and supplemental schedule of Premier Farnell Corporation 401(k) Retirement Savings Plan (the "Plan") as of December 31, 2010 and 2009, and for the years then ended, as listed in the accompanying table of contents. These financial statements and supplemental schedule are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by Prudential Retirement Insurance & Annuity Company, the trustee of the Plan, and Prudential Bank & Trust FSB Company, custodian of the Plan, except for comparing the information with the related information included in the financial statements and the supplemental schedule. We have been informed by the plan administrator that the trustee and custodian hold the Plan's investment assets and execute investment transactions. The plan administrator has obtained certifications from the trustee and custodian as of and for the years ended December 31, 2010 and 2009, that the information provided to the plan administrator by the trustee and custodian is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedule taken as a whole. The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustee and custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Maloney + Novotny LLC

Cleveland, Ohio
September 23, 2011

Business Advisors and Certified Public Accountants
Cleveland | Canton | Elyria

NEXIA INTERNATIONAL

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2010 and 2009

	2010	2009
ASSETS		
Cash	$ 191	$ -
Investments at Fair Value:		
Group Annuity Contract:		
Guaranteed Income Fund	14,413,286	12,556,976
Pooled Separate Accounts:		
Intern Blend/Artio	4,598,271	3,375,808
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Employer contributions receivable	26,854	345
Notes receivable from participants	1,637,857	1,256,595
Total receivables	1,708,476	1,257,292
NET ASSETS AVAILABLE FOR BENEFITS	$46,151,250	$35,667,020

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PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Years Ended December 31, 2010 and 2009

	2010	2009
ADDITIONS		
Investment income:		
Net appreciation in fair value of investments	$ 3,456,024	$ 4,336,494
Interest and dividends	354,893	359,033
Total investment income	3,810,917	4,695,527
Interest income on notes receivable from participants	61,215	75,171
Contributions:		
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Employer contributions	3,336,717	1,238,050
Rollover contributions	360,159	552,088
Total contributions	9,540,984	6,551,794
Total additions	13,413,116	11,322,492
DEDUCTIONS		
Plan benefits paid to participants	2,816,547	4,614,972
Administrative fees	112,339	92,250
Total deductions	2,928,886	4,707,222
NET INCREASE	10,484,230	6,615,270
NET ASSETS AVAILABLE FOR BENEFITS – BEGINNING OF YEAR	35,667,020	29,051,750
NET ASSETS AVAILABLE FOR BENEFITS – END OF YEAR	$46,151,250	$35,667,020

The accompanying notes are an integral part of these financial statements.

Note 1. Description of Plan

The following description of the Premier Farnell Corporation 401(k) Retirement Savings Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

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The Plan began April 1, 1999 and is a defined contribution plan covering significantly all employees of Premier Farnell Corporation (the "Company") who have completed at least 30 days of eligible service other than the following employees to whom coverage has not been extended: union employees (except those of Weldon division) and leased employees. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Contributions:

Participants may make pre-tax contributions in any amount between 1% and 75% of their compensation, subject to certain limits imposed by the Internal Revenue Service. Unless employees elect otherwise upon becoming eligible to participate in the Plan, they are automatically enrolled to contribute 3% of compensation. Effective July 1, 2009, the Plan was formally amended for participants contributing less than 6%. As a result of this amendment, each year, unless they elect otherwise, participants contributing less than 6% will have their contribution increased by 1%, until 6% is reached. This excludes individuals who have elected not to contribute to the Plan.

Effective August 1, 2009, the Company matched contributions equal to 100% of the first 3% and 50% of the next 2% of eligible compensation contributed by participants, not exceeding a total match of 4%. In addition, the Company, at its discretion, may make qualified non-elective contributions ("QNEC") determined on an annual basis. No QNEC was made for 2010 or 2009.

Participant Accounts:

Each participant's account is credited with the participant's contribution and an allocation of any Company contribution and Plan earnings, and is charged with an allocation of administrative expenses. Participants direct their investment fund options. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Notes Receivable From Participants:

Participants may borrow from their fund accounts to the extent of one-half of their vested account balance under the Plan, not to exceed $50,000. The loans are secured by the balance in the participant's account and bear interest at rates that range from 4.25% to 10.50%. Loans issued during 2010 and 2009 bear interest at the prime rate plus 1% (4.25%). Principal and interest is paid ratably through monthly payroll deductions.

Vesting:

A participant has a 100% non-forfeitable vested interest in his or her portion of contributions as well as the Company's contributions.

Note 1. Description of Plan (Continued)

Funding:

The employer's funding policy is to remit participant contributions to the Plan as soon as they can be reasonably segregated from the Company's general assets within the time limits set by the Department of Labor.

Payment of Benefits:

A participant or his/her beneficiary, upon termination, death, or retirement, receives payment of his/her vested account balance in the form of cash. Additionally, the Plan has provisions for an active participant to make hardship withdrawals from his/her cash option account, subject to limitations and restrictions.

Note 2. Summary of Significant Accounting Policies

A. Basis of Presentation – The accompanying financial statements have been prepared on the accrual basis of accounting.

The Plan has evaluated subsequent events through September 23, 2011, which is the date the financial statements were available to be issued.

B. Investment Valuation and Income Recognition – Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 5 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Investments in the Prudential Retirement Insurance & Annuity Company ("Prudential") Guaranteed Income Fund are reported at contract value as determined by Prudential. All transactions within this contract are executed at contract value including full liquidation of the Fund. Though this qualifies as a benefit-responsive investment, Prudential has indicated that, because of the short duration of guaranteed interest rates (reset every six months), there is no material difference between contract value and fair value nor a difference between the crediting interest rate and the average earnings yield. At December 31, 2010 and 2009, the crediting interest rate was reset, therefore, Prudential has determined that the contract value and fair value of the Guaranteed Income Fund were the same, and no adjustment was recorded at year end.

Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined-contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The statements of net assets available for benefits present the fair value of the investment as well as the adjustment of the fully benefit-responsive investment from fair value to contract value (if applicable). The statements of changes in net assets available for benefits are prepared on a contract value basis.

Note 2. Summary of Significant Accounting Policies (Continued)

B. Investment Valuation and Income Recognition (Continued)

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The fair value of the Guaranteed Income Fund at December 31, 2010 and 2009 was $14,413,286 and $12,556,976, respectively. The crediting interest rate is based on several factors, including current economic and market conditions, the general interest rate environment, and both the expected and actual experience of a reference portfolio within the issuer's general account. These rates are established without the use of a specific formula.

The Guaranteed Income Fund does not permit the insurance company to terminate the agreement prior to the scheduled maturity date.

Average Yields	2010	2009
Based on earnings by Plan	2.50	2.50
Based on interest rate credited to participants	2.50	2.50

C. Notes Receivable From Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon terms of the Plan document.

D. Administrative Fees – Fees of the Plan are paid by the Company or the Plan at the discretion of the Company. In addition, any participants who elect to receive a loan, distribution, or withdrawal are charged a processing fee (see Note 7).

E. Use of Estimates – The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

F. Benefit Payments – Benefits are recorded when paid.

G. Reclassifications – Certain prior year amounts have been reclassified to conform to the current year presentation.

Note 3. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan at any time subject to the provisions of ERISA. In the event of Plan termination, participants will receive a total distribution of their account.

Note 4. Unaudited Information

Prudential, trustee of the Plan, and Prudential Bank & Trust FSB Company, custodian of the Plan, hold the Plan investment assets and execute transactions therein. Financial information relating to those assets is included in the accompanying financial statements and supplemental schedule based on information certified by the trustee and custodian. Investments that represent 5% or more of net assets are presented in the statements of net assets available for benefits. This information has not been audited by independent accountants. During 2010, the Plan replaced the Lifetime and Sa/Alger Midcap Gr Strat pooled separate account investment options and the Columbia Mid Cap Value A registered investment company investment option with other fund options and transferred the respective participants' account balances at their direction.

Changes in net assets available for benefits not audited include the following:

	2010	2009
Net appreciation in fair value of investments:		
Pooled separate accounts	$ 2,895,985	$ 3,792,357
Registered investment companies	560,039	544,137
Interest and dividends	354,893	359,033
Interest income on notes receivable from participants	61,215	75,171

Note 5. Fair Value Measurements

Financial Accounting Standards Board ("FASB") *Accounting Standards Codification* ("ASC") 820, *Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Level 1 – Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 – Inputs to the valuation methodology include

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable for the asset or liability;
- inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 – Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Note 5. Fair Value Measurements (Continued)

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2010 and 2009.

- The Guaranteed Income Fund is valued at contract value, which approximates fair value, and represents contributions plus interest at a specified rate, less participant withdrawals and fees. The Guaranteed Income Fund is classified as Level 3 as there are no quoted prices or other observable inputs for pricing.

- The fair value of investments held in the pooled separate accounts is based on their reported net asset value ("NAV"). The NAV is based primarily on observable inputs, the market value of the underlying investments, and classified as Level 2.

- The fair value of investments held in the registered investment companies is determined based on their quoted closing market prices in active markets for identical investments, and are classified as Level 1.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2010 and 2009:

Assets at Fair Value as of December 31, 2010

	Level 1	Level 2	Level 3	Total
Guaranteed Income Fund	$ -	-	$ 14,413,286	$ 14,413,286
Pooled Separate Accounts:				
International blend	-	4,598,271	-	4,598,271
Small cap	-	6,441,599	-	6,441,599
Fixed income	-	3,214,895	-	3,214,895
Equity and income strategy	-	3,194,301	-	3,194,301
Index funds	-	2,833,034	-	2,833,034
Large cap	-	5,279,208	-	5,279,208
Total Pooled Separate Accounts	-	25,561,308	-	25,561,308
Registered Investment Companies:				
Large cap growth	2,865,143	-	-	2,865,143
Mid cap value	1,493,998	-	-	1,493,998
Mid cap growth	108,848	-	-	108,848
Total Registered Investment Companies	4,467,989	-	-	4,467,989
Total	$ 4,467,989	$ 25,561,308	$ 14,413,286	$ 44,442,583

Note 5. Fair Value Measurements (Continued)

	Assets at Fair Value as of December 31, 2009			
	Level 1	Level 2	Level 3	Total
Guaranteed Income Fund	$ -	-	$ 12,556,976	$ 12,556,976
Pooled Separate Accounts:				
International blend	-	3,375,808	-	3,375,808
Small cap	-	4,382,763	-	4,382,763
Fixed income	-	2,100,617	-	2,100,617
Equity and income strategy	-	1,361,544	-	1,361,544
Index funds	-	2,410,556	-	2,410,556
Mid cap	-	36,415	-	36,415
Large cap	-	3,835,055	-	3,835,055
Lifetime duration asset allocation funds	-	1,597,946	-	1,597,946
Total Pooled Separate Accounts	-	19,100,704	-	19,100,704
Registered Investment Companies:				
Large cap growth	1,654,740	-	-	1,654,740
Mid cap value	1,097,308	-	-	1,097,308
Total Registered Investment Companies	2,752,048	-	-	2,752,048
Total	$ 2,752,048	$ 19,100,704	$ 12,556,976	$ 34,409,728

The table below sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the years ended December 31, 2010 and 2009:

	Level 3 Assets	
	2010 Guaranteed Income Fund	2009 Guaranteed Income Fund
Balance, beginning of year	$ 12,556,976	$ 12,779,373
Realized gains	325,487	341,483
Unrealized gains (losses) relating to instruments still held at the reporting date	-	-
Purchases, sales, issuances and settlements (net)	1,530,823	(563,880)
Balance, end of year	$ 14,413,286	$ 12,556,976

Note 6. Income Tax Status

The Internal Revenue Service has determined and informed the Company by a letter dated October 9, 2003, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code ("IRC"). Although the Plan has been amended since receiving the determination letter, the plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified and the related trust is tax-exempt.

Note 6. Income Tax Status (Continued)

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the organization has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan's management has analyzed the tax positions taken by the Plan and has concluded that, as of December 31, 2010, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan's management believes it is no longer subject to income tax examinations for years prior to 2007.

Note 7. Related Party Transactions

Certain Plan investments are held in a Guaranteed Income Fund, Pooled Separate Accounts, and Registered Investment Companies of Prudential, trustee of the Plan. Administrative expenses are paid to Prudential, trustee of the Plan, therefore, these transactions qualify as party-in-interest. Total asset-based and transaction-based fees paid to Prudential were $41,066 and $35,483 in 2010 and 2009, respectively.

As part of the Plan's fee structure, Prudential has agreed to reduce its fee revenue received out of the Plan's investment income and to use these fees instead to pay the cost of the Plan's third party investment advisor. These advisor fees amounted to $71,273 and $56,767 in 2010 and 2009, respectively, and are included in administrative fees on the statements of changes in net assets available for benefits.

Note 8. Risks and Uncertainties

The Plan holds various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

Note 9. Subsequent Event

The union employees who are employed by the Company on June 30, 2011 shall cease to be eligible to receive matching Company contributions under the Plan. An union employees hired, rehired, or transferred to the bargaining unit on or after July 1, 2011 shall be eligible to receive matching Company contributions under the Plan equal to 100% of the first 3% and 50% of the next 2% of each employee's compensation (as defined in the Plan) that such employee contributes to the Plan.

SUPPLEMENTAL SCHEDULE

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

Employer No. 51-0373145
Plan No. 024

December 31, 2010

(a)	(b) Identity of Party	(c) Description of Investment	Current (e) Value
*	Prudential Retirement Insurance & Annuity Company	Group Annuity Contract: Guaranteed Income Fund	$14,413,286
*	Prudential Retirement Insurance & Annuity Company	Pooled Separate Accounts:	
		Intern Blend/Artio	4,598,271
		Small Cap Blend/Whv Fund	3,377,893
		Core Plus Bond/PIMCO	3,214,895
		Sa/Oak Eq & Inc Strat	3,194,301
		Dryden S&P 500 Index Fund	2,833,034
		Eaton Vance Lrg Cap A	2,831,175
		Large Cap Blend/Victory	2,448,033
		Sa/Wf Sm Cap Val Strat II	1,589,813
		Sa/Inv Sm Cap Grow Strat	1,473,893
		Registered Investment Companies:	
	American Funds	Growth Fund of America R3	2,865,143
	RidgeWorth	Ridge Md Cap Val Eqy Cl I	1,493,998
*	Prudential Investments	Pru Jenn Md Cp Grw A	108,848
*	Participant Loans	Interest rates from 4.25% - 10.50%	1,637,857
			$46,080,440

* Represents a party-in-interest.

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

Employer No. 51-0373145
Plan No. 024

December 31, 2010

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		Sa/Oak Eq & Inc Strat	3,194,301
		Dryden S&P 500 Index Fund	2,833,034
		Eaton Vance Lrg Cap A	2,831,175
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	American Funds	Growth Fund of America R3	2,865,143
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